Nursing and Midwifery Council
Fitness to Practise Committee

Substantive Order Review Hearing
Thursday, 5 November 2026

Virtual Hearing

Name of Registrant:	Laura Jane Jones
NMC PIN:	00I0458W
Part(s) of the register:	Sub part 1 RNC Registered Nurse – Children (07 September 2003)
Relevant Location:	Bridgend County Borough
Type of case:	Misconduct
Panel members:	Linda Owen (Chair, lay member) Anne Considine (Registrant member) John Marley (Lay member)
Legal Assessor:	Andrew Reid
Hearings Coordinator:	Isabella Payne
Nursing and Midwifery Council:	Represented by Matthew McPherson, Case Presenter
Mrs Jones:	Not present and unrepresented at this hearing
Order being reviewed:	Conditions of practice order (12 months)
Fitness to practise:	Impaired
Outcome:	**Conditions of practice order extended by 24 months from 24 November 2026 in accordance with Article 30 (1)**

Decision and reasons on application for hearing to be held in private

At the outset of the hearing, Mr McPherson made a request that this case be held partly in private on the basis that proper exploration of Mrs Jones case involves reference to [private]. The application was made pursuant to Rule 19 of the 'Nursing and Midwifery Council (Fitness to Practise) Rules 2004', as amended (the Rules).

The legal assessor reminded the panel that while Rule 19(1) provides, as a starting point, that hearings shall be conducted in public, Rule 19(3) states that the panel may hold hearings partly or wholly in private if it is satisfied that this is justified by the interests of any party or by the public interest.

The panel determined to go into private session in connection with [private] as and when such issues are raised in order to protect their privacy.

Decision and reasons on service of Notice of Hearing

The panel was informed at the start of this hearing that Mrs Jones was not in attendance and that the Notice of Hearing letter had been sent to Mrs Jones' registered email address by secure email on 30 September 2026.

Mr McPherson on behalf of the Nursing and Midwifery Council (NMC), submitted that it had complied with the requirements of Rules 11 and 34 of the 'Nursing and Midwifery Council (Fitness to Practise) Rules 2004', as amended (the Rules).

The panel accepted the advice of the legal assessor.

The panel took into account that the Notice of Hearing provided details of the allegation, the time, dates and that the hearing was to be held virtually, including instructions on how to join and, amongst other things, information about Mrs Jones'

right to attend, be represented and call evidence, as well as the panel's power to proceed in her absence.

In the light of all of the information available, the panel was satisfied that Mrs Jones has been served with the Notice of Hearing in accordance with the requirements of Rules 11 and 34.

Decision and reasons on proceeding in the absence of Mrs Jones

The panel next considered whether it should proceed in the absence of Mrs Jones. It had regard to Rule 21 and heard the submissions of Mr McPherson who invited the panel to continue in the absence of Mrs Jones. He submitted that Mrs Jones had voluntarily absented herself.

The panel has decided to proceed in the absence of Mrs Jones. In reaching this decision, the panel has considered the submissions of Mr McPherson and the advice of the legal assessor. It has had particular regard to the factors set out in the decision of *General Medical Council v Adeogba* [2016] EWCA Civ 162 and had regard to the overall interests of justice and fairness to all parties. It found that:

- Mrs Jones informed the NMC that she was happy for the hearing to proceed in her absence;
- There is no reason to suppose that adjourning would secure her attendance at some future date;
- The order is scheduled to expire at the end of 24 November 2026, and there is a strong public interest in the timely review of the order.

In these circumstances, the panel found it fair to proceed in the absence of Mrs Jones.

Decision and reasons on review of the substantive order

The panel decided to extend the current conditions of practice order for a further period of 24 months.

This order will come into effect at the end of 24 November 2026 in accordance with Article 30(1) of the 'Nursing and Midwifery Order 2001' (the Order).

This is the first review of a substantive conditions of practice order originally imposed for a period of 12 months by a Fitness to Practise Committee panel on 22 October 2025.

The current order is due to expire at the end of 24 November 2026.

The panel is reviewing the order pursuant to Article 30(1) of the Order.

The charges found proved which resulted in the imposition of the substantive order were as follows:

> '*That you, a registered nurse whilst working for Princess of Wales Hospital and/or Royal Glamorgan Hospital:*
>
> *1) Failed to ensure adequate care to patients in that:*
>
> *a) In March 2020, did not identify that the spirometry equipment:*
>
> *i) Was faulty and needed repair/replacement;*
>
> *ii) …*
>
> *b) In relation to Patient K: i)*

i) From March 2019 to February 2022, failed to provide adrenaline auto-injector training since they were prescribed an adrenaline auto-injector in March 2019;

ii) …

c) On or around January to February 2022, failed to provide adrenaline auto-injector training for Patients B/ H/ I/ J;

d) In relation to Patient G, failed to arrange a follow up allergy clinic appointment following their skin prick test and blood tests done in February 22;

2) Failed to keep accurate records concerning the patients in your care in that:

a) In relation to Patient E, recorded incorrect information in a clinic letter from June 2021;

b) In February 2022, in relation to Patient B:

i) …

ii) Failed to file a copy of their food allergy action plan in their medical notes;

c) …

d) ..

e) …

i) …

ii) …

f) In or around February 2022, in relation to Patient G, failed to record information regarding school contact in their medical notes;

g) Between January 2022 - May 2022, in relation to Patient A, failed to record information regarding a previous skin prick test in their medical notes.

AND in light of the above, your fitness to practise is impaired by reason of your misconduct.'

The original panel determined the following with regard to impairment:

'The panel determined that the breaches were to do with capacity and clinical errors and could be addressed with supervision and strengthening of practice and therefore could be remediated, however there was no evidence to suggest that such undertakings had taken place. The panel therefore found that the risk of repetition still remains.

The panel finds that patients were put at risk and could have been caused harm as a result of Mrs Jones' misconduct. The panel determined that a finding of impairment is necessary on the grounds of public protection.

In addition, the panel concluded that public confidence in the profession would be undermined if a finding of impairment were not made in this case. There were significant and repeated failings that compromised the care and safety of the patients that were so serious that they must lead to a finding of impairment in this case. Therefore, the panel also finds Mrs Jones' fitness to practise impaired on the grounds of public interest.

The panel bore in mind that the overarching objectives of the NMC; to protect, promote and maintain the health, safety, and well-being of the public and patients, and to uphold and protect the wider public interest. This includes promoting and maintaining public confidence in the nursing and midwifery professions and upholding the proper professional standards for members of those professions.

Having regard to all of the above, the panel was satisfied that Mrs Jones' fitness to practise is currently impaired.'

The original panel determined the following with regard to sanction:

The panel was of the view that to impose a suspension order or a striking-off order would be wholly disproportionate and would not be a reasonable response in the circumstances of Mrs Jones' case. The panel found Mrs Jones would benefit from undertaking supervised training in the field which would not be possible if she were to be temporarily removed from the register.

Having regard to the matters it has identified, the panel has concluded that a conditions of practice order will mark the importance of maintaining public confidence in the profession, and will send to the public and the profession a clear message about the standards of practice required of a registered nurse.

The panel determined that the following conditions are appropriate and proportionate in this case:

'For the purposes of these conditions, 'employment' and 'work' mean any paid or unpaid post in a nursing, midwifery or nursing associate role. Also, 'course of study' and 'course' mean any course of educational study connected to nursing, midwifery or nursing associates.

1. Your principal employment must be with:

a) NHS provider or;

b) Agency that limits your working to one designated clinical area or hospital sight and;

c) You must only work within a general nursing role and not act as a specialist nurse.

2. You must have a designated work place supervisor.

3. You must ensure that you are supervised any time you are working. Your supervision must consist of:

a) You working along-side a registered nurse of an equivalent band, under direction of the nurse in charge

b) Fortnightly meetings with your supervisor to review case notes and any training undertaken by you or required.

4. You must undertake a Continued Professional Development (CPD) course in respect of:

a) Accurate and comprehensive record keeping

b) Communicating with patients and their families

c) Safe use and management of medical equipment

5. You must create a personal development plan (PDP). Your PDP must address your record keeping and communication with patients and/or when required family members. You must meet with your line manager (at least once every 2 months) to discuss your progress with specific reference to record keeping and any training you are undertaking.

a) Following the creation of your PDP, you will send your case officer a copy within 6 weeks of commencement of employment in your role.

b) Send your case officer a report from your line manager every 2 months. This report must show your progress towards the aims set out in your PDP.

6. You must keep us informed about anywhere you are working by:

a) Telling your case officer within seven days of accepting or leaving any employment.

b) Giving your case officer your employer's contact details.

7. You must keep us informed about anywhere you are studying by:

a) Telling your case officer within seven days of accepting any course of study.

b) Giving your case officer the name and contact details of the organisation offering that course of study.

8. You must immediately give a copy of these conditions to:

a) Any organisation or person you work for.

b) Any agency you apply to or are registered with for work.

c) Any employers you apply to for work (at the time of application).

d) Any establishment you apply to (at the time of application), or with which you are already enrolled, for a course of study.

e) Any current or prospective patients or clients you intend to see or care for on a private basis when you are working in a self-employed capacity

9. You must tell your case officer, within seven days of your becoming aware of:

a) Any clinical incident you are involved in.

b) Any investigation started against you.

c) Any disciplinary proceedings taken against you.

10. You must allow your case officer to share, as necessary, details about your performance, your compliance with and / or progress under these conditions with:

a) Any current or future employer.

b) Any educational establishment.

c) Any other person(s) involved in your retraining and/or supervision required by these conditions

*The period of this order is for **12 months.***

The panel determined that a year would give Mrs Jones the opportunity of finding employment and meeting her conditions of practice.

Before the order expires, a panel will hold a review hearing to see how well Mrs Jones has complied with the order. At the review hearing the panel may revoke the order or any condition of it, it may confirm the order or vary any condition of it, or it may replace the order for another order.

Any future panel reviewing this case would be assisted by:

- *Evidence of professional development, including documentary evidence of completion of the above mentioned courses, a reflective piece and*

testimonials from a line manager or supervisor that detail your current work practices.

This will be confirmed to Mrs Jones in writing.'

Decision and reasons on current impairment

The panel has considered carefully whether Mrs Jones' fitness to practise remains impaired. Whilst there is no statutory definition of fitness to practise, the NMC has defined fitness to practise as the ability of a professional on our register to practise as a nurse, midwife or nursing associate safely and effectively without restriction. In considering this case, the panel has carried out a comprehensive review of the order in light of the current circumstances. Whilst it has noted the decision of the last panel, this panel has exercised its own judgement as to current impairment.

The panel has had regard to all of the documentation before it, including the NMC bundle and the responses from Mrs Jones. It has taken account of the submissions made by Mr McPherson on behalf of the NMC. He submitted that there is a persuasive burden on Mrs Jones to demonstrate that she acknowledged her past misconduct and had, through insight and remediation, taken steps to address the previous findings of impairment. In support of this submission, Mr McPherson referred to *Abraham v General Medical Council* [2008] EWHC 183 (Admin).

Mr McPherson submitted that Mrs Jones had provided no evidence to demonstrate that she is no longer impaired. He reminded the panel that the purpose of the review was to protect the public from the risk of harm, maintain public confidence in the nursing profession and uphold the standards expected of a registered nurse.

Mr McPherson submitted that, in this case, the previous panel had considered a number of regulatory concerns in detail and had provided helpful guidance through the conditions of practice order as to the steps Mrs Jones should take to demonstrate that her fitness to practice is no longer impaired. These concerns

included a lack of insight into her failings, a pattern of misconduct over a period of time and conduct which placed patients at risk of harm. Mr McPherson submitted that such findings were serious and should not be taken lightly.

Mr McPherson submitted that there is insufficient evidence before the panel to demonstrate that Mrs Jones has addressed the regulatory concerns or that her fitness to practice is no longer impaired. Accordingly, it was the NMC's position that Mrs Jones' fitness to practise remained impaired.

Mr McPherson reminded the panel that the previous panel had imposed a 12-month conditions of practice order to provide Mrs Jones with sufficient time to secure employment and an opportunity to demonstrate compliance with the conditions. The previous panel had also provided guidance as to the evidence that would assist a future reviewing panel, including a reflective piece, testimonials and evidence of continuing professional development. However, Mr McPherson submitted that none of this evidence had been provided to the panel at the present review.

Mr McPherson submitted that the panel should approach its decision from a risk assessment perspective rather than a punitive one. He identified two options available to the panel. The first was to extend the conditions of practice order to provide Mrs Jones with a further opportunity to demonstrate, at a future review, that her fitness to practice is no longer impaired. The second was to allow the order to lapse or take no further action, on the basis that Mrs Jones intends not to return to practice.

Mr McPherson acknowledged that Mrs Jones had provided an email indicating that she did not currently intend to return to practice. However, he submitted that the panel needed to consider whether Mrs Jones intended never to return to practice or whether she might seek to return at some point in the future.

Mr McPherson invited the panel to consider that if Mrs Jones were to return to practice in the future, allowing her to return to unrestricted practice would place the public at risk of harm and undermine the public interest, given the risk of repetition of the previous concerns.

Mr McPherson submitted that there remained an ongoing risk to the public and to the reputation of the nursing profession. He invited the panel, should it consider that Mrs Jones might return to practice, to extend the conditions of practice order for a further period in order to maintain public protection and uphold the wider public interest and allow her time to demonstrate insight and strengthened practice.

The panel heard and accepted the advice of the legal assessor.

In reaching its decision, the panel was mindful of the need to protect the public, maintain public confidence in the profession and to declare and uphold proper standards of conduct and performance.

The panel considered whether Mrs Jones' fitness to practise remains impaired.

The panel noted that the original panel found that Mrs Jones had insufficient insight. At this hearing the panel found that it had no new evidence before it to suggest that Mrs Jones had developed insight into her failings, had strengthened her practice, or had complied with the conditions and guidance provided by the previous panel.

In its consideration of whether Mrs Jones has taken steps to strengthen her practice, the panel took into consideration [private] and considered that she may have not been able to fully comply with the conditions outlined by the previous panel. Nonetheless, it had no new evidence before it to suggest that there had been any remediation or steps taken to strengthen her practice.

The original panel determined that Mrs Jones was liable to repeat matters of the kind found proved. Today's panel has not received any new information to suggest that Mrs Jones is not liable to repeat matters, and therefore determined that Mrs Jones is liable to repeat matters of the kind found proved. The panel therefore decided that a finding of continuing impairment is necessary on the grounds of public protection.

The panel has borne in mind that its primary function is to protect patients and the wider public interest which includes maintaining confidence in the nursing profession and upholding proper standards of conduct and performance. The panel determined that, in this case, a finding of continuing impairment on public interest grounds is also required.

For these reasons, the panel finds that Mrs Jones' fitness to practise remains impaired.

Decision and reasons on sanction

The panel first considered whether to take no action, thereby allowing the order to lapse on its expiry at the end of 24 November 2026. The panel had careful regard to the NMC written guidance *'Removal from the register when there is a substantive order in place'* (Rev 2H). The panel noted the guidance under *'Lapse with impairment'*, as follows;

> *A panel should consider allowing a professional to lapse with impairment only in cases where all the following factors are present:*
>
> - *the professional would no longer be on the register but for the order in place[8];*
> - *the panel concludes that the professional is unlikely to return to safe unrestricted practice within a reasonable period of time;*
> - *The case relates solely to health or English language* ***or*** *is one where the professional has retired and has made it clear through engagement with the NMC and evidence that they do not intend to return to practice* ***or*** *situations where a professional's inability to address impairment not related to health (for example misconduct or lack of competence) is clearly related to a health condition;*
> - *The case doesn't involve concerns of the kind referred to in our guidance on sanctions for the highest risk cases.*

On the basis of the information before it, the panel was unable to conclude that Mrs Jones has retired or has made it clear through engagement with the NMC and evidence that she does not intend to return to practice at some stage in the future. For this reason, the panel determined that the requirements for lapse with impairment are not met at this time.

It then considered the imposition of a caution order but again determined that, due to the seriousness of the case, and the public protection issues identified, an order that does not restrict Mrs Jones' practice would not be appropriate in the circumstances. The SG states that a caution order may be appropriate where *'the case is at the lower end of the spectrum of impaired fitness to practise, but the Committee wants to mark that what happened was unacceptable and must not happen again.'* The panel considered that Mrs Jones' misconduct was not at the lower end of the spectrum and that a caution order would be inappropriate in view of the issues identified. The panel decided that it would be neither proportionate nor in the public interest to impose a caution order.

The panel next considered whether extending the conditions of practice order on Mrs Jones' registration would still be a sufficient and appropriate response. The panel is mindful that any conditions imposed must be proportionate, measurable and workable.

The panel determined that it would be possible to formulate appropriate and practical conditions which would address the failings highlighted in this case.

The panel was of the view that extending the current conditions of practice order is sufficient to protect patients and the wider public interest, noting as the original panel did that the breaches were to do with capacity and clinical errors and could be addressed with supervision and strengthening of practice and therefore could be remediated with the appropriate conditions imposed.

The panel was of the view that to impose a suspension order or a striking-off order would be wholly disproportionate and would not be a reasonable response in the

circumstances of Mrs Jones' case because it does not allow her the opportunity to demonstrate the remediation that is necessary in this case.

Accordingly, the panel determined, pursuant to Article 30(1)(c) to extend the current conditions of practice order for a period of 24 months, which will come into effect on the expiry of the current order, namely at the end of 24 November 2026. The conditions remain unchanged and in the panel's view remain appropriate and proportionate:

> 'For the purposes of these conditions, 'employment' and 'work' mean any paid or unpaid post in a nursing, midwifery or nursing associate role. Also, 'course of study' and 'course' mean any course of educational study connected to nursing, midwifery or nursing associates.'
>
> 1. Your principal employment must be with:
>   a. NHS provider or;
>   b. Agency that limits your working to one designated clinical area or hospital sight and;
>   c. You must only work within a general nursing role and not act as a specialist nurse.
>
> 2. You must have a designated work place supervisor.
>
> 3. You must ensure that you are supervised any time you are working. Your supervision must consist of:
>   a. You working along-side a registered nurse of an equivalent band, under direction of the nurse in charge
>   b. Fortnightly meetings with your supervisor to review case notes and any training undertaken by you or required.
>
> 4. You must undertake a Continued Professional Development (CPD) course in respect of:
>   a. Accurate and comprehensive record keeping
>   b. Communicating with patients and their families

c. Safe use and management of medical equipment

5. You must create a personal development plan (PDP). Your PDP must address your record keeping and communication with patients and/or when required family members. You must meet with your line manager (at least once every 2 months) to discuss your progress with specific reference to record keeping and any training you are undertaking.

a. Following the creation of your PDP, you will send your case officer a copy within 6 weeks of commencement of employment in your role.
b. Send your case officer a report from your line manager every 2 months. This report must show your progress towards the aims set out in your PDP.

6. You must keep us informed about anywhere you are working by:

a. Telling your case officer within seven days of accepting or leaving any employment.
b. Giving your case officer your employer's contact details.

7. You must keep us informed about anywhere you are studying by:

a. Telling your case officer within seven days of accepting
b. any course of study.
c. Giving your case officer the name and contact details of
d. the organisation offering that course of study.

8. You must immediately give a copy of these conditions to:

a. Any organisation or person you work for.
b. Any agency you apply to or are registered with for work.
c. Any employers you apply to for work (at the time of application).
d. Any establishment you apply to (at the time of application), or with which you are already enrolled, for a course of study.

e. Any current or prospective patients or clients you intend to see or care for on a private basis when you are working in a self-employed capacity

9. You must tell your case officer, within seven days of your becoming aware of:

a. Any clinical incident you are involved in.
b. Any investigation started against you.
c. Any disciplinary proceedings taken against you.

10. You must allow your case officer to share, as necessary, details about your performance, your compliance with and / or progress under these conditions with:

a. Any current or future employer.
b. Any educational establishment.
c. Any other person(s) involved in your retraining and/or supervision required by these conditions

The period of this extended order is 24 months.

The panel determined that this amount of time would give Mrs Jones a further opportunity of finding employment and meeting her conditions of practice.

Before the order expires, a panel will hold a review hearing to see how well Mrs Jones has complied with the order. At the review hearing the panel may revoke the order or any condition of it, it may confirm the order or vary any condition of it, or it may replace the order for another order.

Any future panel reviewing this case would be assisted by:

- Evidence of professional development, including documentary evidence of completion of the above mentioned courses, a reflective piece and testimonials from a line manager or supervisor that detail your current work practices.

This will be confirmed to Mrs Jones in writing.

That concludes this determination.